

BOARD FOOT NOTES

Texas State Board of Podiatric Medical Examiners
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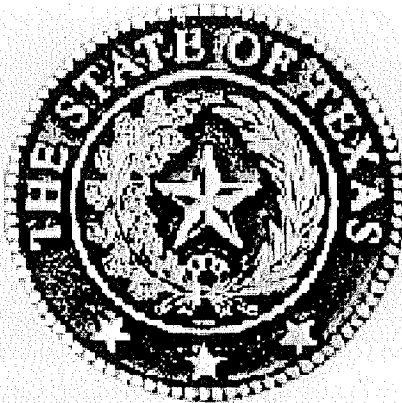
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BOARD DEFINES "FOOT" FOR TEXAS

The Texas State Board of Podiatric Medical Examiners has recently enacted a new rule that defines "foot" for purposes of podiatric medical practice in Texas.

During its February 16, 2000 meeting, the Board appointed a committee to address defining "foot". At the August 17, 2000 Board Meeting, the committee brought back a proposed definition of "foot" that was approved by the full Board. This definition was later published as a proposed rule in the *Texas Register* on September 20, 2000.

The Board received a number of comments on this proposed rule. In order to allow all interested parties the opportunity to express their opinions on the proposed definition, on December 15, 2000, the Board held a Public Hearing on this issue in Austin. At this hearing, representatives of the Texas Orthopedic Association and the Texas Podiatric Medical Association gave



The Great Seal of Texas

testimony and/or expressed their positions on the proposed rule change.

All of the comments received prior to the public hearing and all of the testimony from the hearing was presented to the Board's committee for review and comment.

At its January 17, 2001 Board Meeting, the Board heard the final recommendation of the committee and voted to accept the committee's definition of "foot"

The definition was republished in the *Texas Register* and became effective on April 1, 2001. The new Board Rule states, "The foot is the tibia and the fibula in their articulation

with the talus and all bones to the toes, inclusive of all soft tissues (muscles, nerves, vascular structures, tendons, ligaments and any other anatomical structures) that insert into the tibia and fibula in their articulation with the talus and all bones to the toes."

NEW BOARD MEMBERS APPOINTED BY GOVERNOR

At the Board's January 2000 meeting, three new Board Members, recently appointed by Governor Bush, were welcomed to the Board by Donald Falknor, D.P.M., Board President.

Bradford Glass, D.P.M. from Midland, Texas replaced Dr. W. Preston Goforth of Temple, Texas, who had been a Board Member for twelve years. During that time he had served as both Board Vice-President and President.

Sandra Cuellar, D.P.M. of Dallas replaced Dr. Paul Schwarzentraub of Lubbock, who served for six years during which time he was Chair of the CME Committee and Board Vice-President.

Ms. Kathryn M. Boyd of Georgetown, Texas was re-appointed as one of the Board's consumer members. She replaced Mr. Mervin Perry of Austin who died while in office.

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Special points of interest:

- *The Board adopts new rule defining "foot".*
- *New CME rules no longer require licensee's to report their hours of CME to the Board.*
- *The Medical Review Committee is looking for volunteer D.P.M.s.*
- *Changes in the Board's Staff*

NEW CME HOURS RULES CHANGE HOW HOURS MUST BE REPORTED TO BOARD



CME Hours obtained no longer need to be sent to the Board

At its January 17, 2001 meeting, the Board voted to enact sweeping changes to its Continuing Medical Education Rules. These changes were published in the *Texas Register* and became effective on April 1, 2001. These new rules now require all licensees to maintain their own Continuing Medical Education Certificates and hours. Certificates of Attendance for continuing medical education hours obtained, must now be kept by the licensee in their primary practice office for a least four (4) years after the hours were earned, to document the completion of the seminar, etc. attended. Licensees are no longer required to send these CME attendance certificates to the Board. Licensees will now be required to sign a written affirmation, which will be included on the annual license renewal form, attesting to completing the required 30 hours of

continuing medical education units within the prior two year period.

A small percentage of licensees renewing their license will be required to produce proof of completion of their CME hours affirmed on their annual renewal notice. The licensees to be reviewed will be chosen randomly, out of the pool of annual license renewal forms.

The Board will no longer maintain licensee CME hours or send out CME printouts. A copy of each licensee's CME record as of September 1, 2000 is included with this newsletter. Licensee's should add any CME hours obtained after September 1, 2000 to this printout to determine their current CME hours.

The full text of the new rule appears in an article on page three of this newsletter.

"We will be replacing our Investigative Liaisons with qualified podiatric physicians from around Texas, who will act as medical reviewers."

INVESTIGATION MEDICAL REVIEWERS NEEDED

At a recent board meeting, the full Board voted to revamp the procedure presently used to review medical and standard of care issues relating to complaints against licensees that are received by the board.

In the past, one or more Board Members were appointed by the board to act as "investigative liaisons". When a complaint involving medical or scope of practice issues was received by the Board, the Board's investigator obtained the necessary statements, medical records, etc. and then forwarded this information to the investigative liaison. The liaison then reviewed all of the information provided and determined

if a violation of the Board's rules or statute had occurred. Based on this review, the Board then either closed the case or proceeded on to formal board action.

We will be replacing the use of Board members with qualified podiatric physicians from around Texas, who will act as medical reviewers, in much the same way as the old investigative liaisons performed this vital task.

If you are interested in serving as a medical reviewer for the Board, please contact our investigator, Hemant Makan at (512) 305-7005 for further information.



Employee changes have occurred in our staff.

BOARD OFFICE STAFF CHANGES

There have been two recent changes in the staff working at our Board Office. Our former investigator, Cyndi Singleton left us to pursue a career in law enforcement. Ms. Singleton is now a Lieutenant in the Leander, Texas Police Department. She is presently assigned as the Commander of their Criminal Investigations Division.

Our new investigator is Mr. Hemant Makan. Mr. Makan has a degree in psychology from UT Austin.

Ms. Phyllis Barton has left our staff to pursue her dream of becoming a licensed beautician. She has been replaced by Ms. Tametra Fontenot. Ms. Fontenot comes to us with a background in finance from the City of Austin and from working with the Texas Rehabilitation Commission and the Texas Department of Licensing and Regulation.

Please join us in welcoming them both aboard!

Text of New CME Rule

The following is the full text of the new Board Rule, §378.1 T.A.C."

- (a) Each person licensed to practice podiatric medicine in the State of Texas is required to have 30 hours of CME every two years for the renewal of their license to practice podiatric medicine. 2 hours of the 30 hours of CME may be a course, class, seminar or workshop in Ethics. It shall be the responsibility of the podiatric physician to ensure that all CME hours being claimed to satisfy the 30 hour bi-annual requirement meet the standards for CME as set by the Board. One hour of CME is defined as a typical 50 minute classroom instructional session or its equivalent. Practice management, home study and self-study programs will not be given CME hours.
- (b) A licensee shall receive 100% credit for each hour of training (1 hour of training equals 1 hour of CME) for podiatric medical meetings and training sponsored by APMA, APMA affiliated organizations, TPMA, state, county or regional podiatric medical association podiatric medical meetings, university sponsored podiatric medical meetings, hospital sponsored podiatric medical meetings or hospital podiatric medical grand rounds, medical meetings sponsored by the Foot & Ankle Society or the orthopedic community relating to foot care, and others at the discretion of the Board.
- (c) Cardiopulmonary Resuscitation (CPR) certification is eligible for up to 3 hours of CME credit and Advanced Cardiac Life Support (ACLS) certification for up to 6 hours of CME credit (credit can only be obtained for one, not both).
- (d) If a podiatric physician has an article published (not just submitted) in a peer review journal, (s)he may receive 1 hour of CME credit for the article, with credit for the article being provided only once, regardless of the number of times or number of journals in which the article is published.
- (e) If a podiatric physician attends and speaks at the same lecture, CME credit may only be obtained for attending the lecture.
- (f) A licensee shall receive 50% credit for each hour of training (one hour of training equals one half hour of CME) for non-podiatric medical sponsored meetings that are relative to podiatric medicine. The yardstick used to measure whether the training is "relative" is; "Will the training enhance the knowledge and abilities of the podiatric physician in terms of improved quality and delivery of patient care?" 50% shall also be assigned to hospital grand rounds, hospital CME programs, corporate sponsored meetings, and meetings sponsored by the AMA, the orthopedic community, the American Diabetes Association, the Nursing Association, the Physical Therapy Association, and

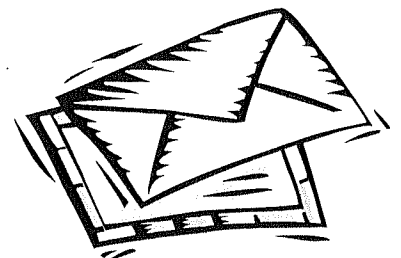
others at the discretion of the Board.

- (g) These hours of CME must be obtained in the 24 month period immediately preceding the year in which the license was issued. The 2 year period will begin on September 1 and end on August 31, two years later. The year in which the 30 hour credit requirement must be completed after the original license was issued is; every odd numbered year, if the license was issued in an odd year, or every even year, if the license was issued in an even numbered year. A licensee who completed more than the required 30 hours during the preceding CME period may carry forward a maximum of 10 hours for the next CME period.
- (h) Documentation of CME courses shall be made available to the Board upon request, **but shall not be sent to the Board by facsimile, or mailed with the annual license renewal form.** Each licensee shall maintain the licensee's CME records at the licensee's main practice location for 4 years, evidencing completion of the CME programs attended by the licensee. The Board shall conduct random checks of licensee documentation to ensure compliance with this rule.
- (i) A small percentage of podiatric physicians who renew their licenses will be required to produce proof of completion of the CME hours they affirmed obtaining on their annual license renewal notice. The licensees to be audited will be chosen randomly out of the pool of annual license renewal forms. Once a licensee has been randomly chosen for the CME audit, (s)he will receive a letter requiring the licensee to submit to the Board proof of obtaining the hours claimed on the annual renewal form. Original documents will not be required; copies of certificates and forms will be sufficient.
- (j) If the licensee does not comply with the request for CME documentation within 30 days of receipt of the letter, or if the licensee is unable to provide proof of the hours claimed on the annual renewal form, the licensee will be investigated by the Board. If the investigation reveals that the requirement was not met, the licensee may be disciplined. The penalty for non-compliance with the bi-annual CME requirement shall be a letter of reprimand and a \$2,500 administrative penalty fine per violation, up to the maximum allowed by law.
- (k) The Board may assess the continuing education needs of a licensee and require the licensee to attend continuing education courses specified by the Board.
- (l) CME obtained as a part of a disciplinary action is not acceptable credit towards the total of 30 hours required every two years.



New CME Rules are in effect.

"The penalty for non-compliance with the bi-annual CME requirement is a letter of reprimand and a minimum \$2,500 administrative penalty..."



Licensees should no longer send the Board copies of their CME hours.



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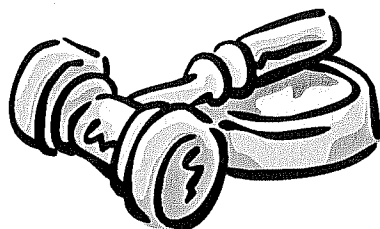
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GO ONLINE TO ACCESS CURRENT BOARD
RULES, OUR STATUTE, AND A WEALTH OF
ADDITIONAL INFORMATION AT:
WWW.FOOT.STATE.TX.US

BOARD DISCIPLINARY ACTIONS



Board Discipline

Dale Anderson, D.P.M.— Allegation involved professional failure to practice medicine in an acceptable manner consistent with public health and welfare—Agreed Board Order with \$2,500 fine and 12 mandatory CME hours.

Stephen Barrett, D.P.M.—Allegation involved professional failure to practice medicine in an acceptable manner consistent with public health and welfare— Agreed Board Order with 15 mandatory CME hours.

John Codwell, D.P.M.— Allegation involved professional failure to practice medicine in an acceptable manner consistent with public health and welfare— Agreed Board Order with \$5,000 fine and a mandatory research paper.

Niles Foster, D.P.M.—Allegation involved professional failure to comply with US Department of Labor Occupational Safety & Health Administration Guidelines—Agreed Board Order with \$800 fine.

Gary Mellon, D.P.M.—Allegation involved professional failure to practice medicine in an acceptable

manner consistent with public health and welfare— Agreed Board Order with revocation of his license to practice podiatric medicine.

Spencer Nichols, D.P.M.—Allegation involved unprofessional conduct and records/billing violations—Agreed Board Order with \$500 fine.

Gary Payne, D.P.M.—Allegation involved a hazardous office environment—Agreed Board Order with \$2,000 fine and 1,000 hours of community service.

Stephen Winarick, D.P.M.—Allegation involved professional failure to practice medicine in an acceptable manner consistent with public health and welfare— Agreed Board Order with 15 hours of mandatory CME.

Three podiatric physicians were issued administrative fines for records violations totaling \$700.

Three podiatric physicians received administrative fines for negligence issues totaling \$3,000.

Eighteen podiatric physicians received administrative fines for advertising issues totaling \$10,200.